

GRADY COUNTY CODE ENFORCEMENT

250 N. BROAD ST. BOX 6

CAIRO, GEORGIA 39828

(229) 377-8857 FAX # (229) 377-6947

REQUIREMENT FOR MOBILE HOME INSTALLATION:

STEP 1 MUST BE COMPLETED BEFORE MOVING HOME IN.

A - MUST BRING A CURRENT GRADY COUNTY TAX DECAL.

B - SEPTIC TANK APPROVAL - FROM ENVIRONMENTAL HEALTH
DEPARTMENT - OFFICE HOURS 8 a.m. - 9 a.m.

C - DEED OR PLAT - MUST MEET COUNTY REQUIREMENTS.

D - ADDRESS APPLICATION FILLED OUT - FOR 911.

E - SITE PLAN

F - MOVERS INSTALLER / SET UP PERMIT - FULLY FILLED OUT, SIGNED BY
THE LICENSED MOVER. (Mover / Installer must be licensed in GRADY CO. as well
as GEORGIA).

STEP 2 MUST BE COMPLETED BEFORE ANY INSPECTIONS ARE MADE.

A - ELECTRICAL PERMIT - FOR SERVICE POLE, WIRING MOBILE HOME TO
POLE, WIRING OF AIR CONDITIONER, OR WELL.

B - AIR CONDITIONER PERMIT - THIS MUST BE PURCHASED FOR ALL
CENTRAL UNITS BEING INSTALLED IN MOBILE HOME, (For installation of
ductwork).

C - PLUMBING PERMIT -

D - GAS PERMIT -

E - CALL FOR INSPECTION UPON COMPLETION OF WORK. (24 HOURS NOTICE)

NOTE:

TEMPORARY POWER RELEASE

- 1) ONLY IF ALL PERMITS HAVE BEEN ISSUED.
- 2) ALL WIRING OF SERVICE POLE & HOME IS CORRECT
- 3) ADDRESS CORRECTLY IN PLACE AT TIME OF INSPECTION. MUST BE CLEARLY
VISIBLE FROM THE ROAD. (NUMBERS 2 1/2 " TALL).
- 4) STEPS AND LANDING AT ALL DOORS TO CODE.

MOBILE HOME SET UP PERMIT APPLICATION

CK. # _____

REC. # _____

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PLEASE PRINT

LOCATION OF HOME
COUNTY ROAD NAME _____

SUBDIVISION/LAND OWNER _____ LOT # _____

LAND LOT # _____ TAX MAP # _____ TAX DECAL # _____

LAND DISTRICT _____ PARCEL # _____ TAX YEAR _____

OWNER/
TENANT _____ PHONE # _____

ADDRESS _____ CITY _____ STATE _____

DEALER NAME _____ PHONE # _____

CONTRACTOR/
SET UP PERSON _____ CONTRACTOR ID # _____

COMPANY NAME _____

PLUMBING DONE BY _____

DESCRIPTION OF HOME:

MAKE _____ MODEL _____ YEAR _____

SIZE _____ ESTIMATED COST \$ _____ SERIAL # _____

TOTAL ELECTRIC _____ CENTRAL AIR _____ COLOR OF M / H _____

GAS STOVE _____ DEED / PLAT _____ # OF BEDROOMS _____

GAS HEAT/AIR _____ FIRE DIST. _____ # OF BATHROOMS _____

SEPTIC TANK == APPROVED NEW == EXISTING _____ FIREPLACE YES / NO _____

CONTRACTORS SIGNATURE _____ DATE _____

set up